

1100-142 B

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

## 1. CORRESPONDENCE ADDRESS

CUSHMAN, DARBY & CUSHMAN  
ELEVENTH FLOOR  
1615 L STREET, N.W.  
WASHINGTON, DC 20036-5601

## 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

☐ Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

07/551,644

07/12/90

012

LEVY, N

1502

06/30/92

First Named Applicant

HETTICHE, HELMUT

TITLE OF INVENTION  
ELASTIC CONTAINING MEDICAMENTS

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

1

62748/67217P

424-489.000

E21

UTILITY

NO

\$1130.00

09/30/92

## 3. Further correspondence to be mailed to the following:

Cushman, Darby & Cushman  
1100 New York Avenue  
9th Floor  
Washington, D.C. 20036

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Cushman, Darby &amp; Cushman

2

3

060 MC 09/04/92 07551644

DO NOT USE THIS SPACE  
1 142 1,130.00 CK

SC13268 09/03/92 07551644

03-3975 130 561

30.00CH

## 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Asta Pharma AG

(2) ADDRESS: (City &amp; State or Country)

Germany

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

Germany

☐ This application is NOT assigned.

☒ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

☒ Issue Fee ☐ Advanced Order - # of Copies 10

6b. The following fees should be charged to: (Minimum of 10)

DEPOSIT ACCOUNT NUMBER 03-3975

(Enclose Part C) only if deficient or

☒ Issue Fee ☐ Advanced Order - # of Copies missing

☐ Any Deficiencies in Enclosed Fees (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)

Lawrence A. Hymo 19,057

8/31/92

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.